



NOV 18 2004 3:03PM

Connolly Bove Lodge & Hutz

NO. 0379 P. 4

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** **Mail Stop ISSUE FEE**
Commissioner for Patents
P.O. Box 1450
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

30678 1590 09/18/2004
CONNOLLY BOVE LODGE & HUTZ LLP
SUITE 800
1990 M STREET NW
WASHINGTON, DC 20036-3425
11/19/2004 SDIRETA2 00000063 220185 09913833

01 FC:2501 685.00 DA

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/913,833	12/03/2001	Jouko Suhonen	21499/0050	4499

TITLE OF INVENTION: DEVICE FOR RESTORATIVE DENTISTRY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	11/18/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
WILSON, JOHN J	3732	433-22600

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1. CONNOLLY, BOVE
2. LODGE & HUTZ LLP
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

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Issue Fee
 Publication Fee (No small entity discount permitted)
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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(Date)

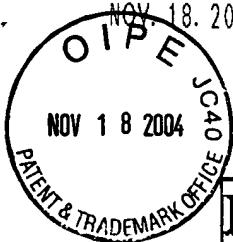
Brian J. Hairston, Reg. No. 46,750

November 18, 2004

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NOV 18. 2004 3:02PM

Connolly Bove Lodge & Hutz

NO. 0379 P. 1

FAX TRANSMISSION

DATE: November 18, 2004**PTO IDENTIFIER:** Application Number 09/913,833-Conf. #4499
Patent Number**Inventor:** Jouko Suhonen**MESSAGE TO:** Office of Patent Publication**FAX NUMBER:** (703) 746-4000**FROM:** CONNOLLY BOVE LODGE & HUTZ LLP

Brian J. Hairston

PHONE: (202) 331-7111**Attorney Dkt. #:** 21499-00050-US**PAGES (Including Cover Sheet):** 4**CONTENTS:** FCC Transmittal; Issue FCC Transmittal; Certificate of Transmission under 37 CFR 1.8; and Charge \$685.00 to deposit account 22-0185 (Issue FCC-Small Entity).

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NO. 0379 P. 2

PTO/SB/97 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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NO. 0379 P. 3

PTO/SB/17 (10-04v2)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Complete if Known

Application Number	09/913,833-Conf. #4499
Filing Date	December 3, 2001
First Named Inventor	Jouko Suhonen
Examiner Name	J. J. Wilson
Art Unit	3732
Attorney Docket No.	21499-00050-LJS

FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 685.00)

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account:

Deposit Account Number: 22-0185

Deposit Account Name: Connolly Bove Lodge & Hutz LLP

The Director is authorized to: (check off that apply)

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FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1806	1,840*	1806	1,840*
1251	110	2251	55
1252	430	2252	215
1253	880	2253	490
1254	1,530	2254	765
1255	2,080	2255	1,040
1401	340	2401	170
1402	940	2402	170
1403	300	2403	150
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,370	2453	685
1501	1,370	2501	685
1502	490	2502	245
1503	660	2503	390
1460	130	1460	130
1807	50	1807	50
1808	180	1808	180
8021	40	8021	40
1809	790	2809	395
1810	790	2810	395
1801	790	2801	395
1802	900	1802	900
Other fee (specify)			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 685.00)

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(Complete if applicable)

Name (Print/Type)	Brian J. Hairston	Registration No. (Attorney/Agent)	46,750	Telephone	(202) 331-7111
Signature		Date	November 18, 2004		